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PTO/SB/66 (09-04)

Approved for use through 05/31/2006. OMB 0651-0016

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**PETITION TO ACCEPT UNINTENTIONALLY DELAYED PAYMENT OF
MAINTENANCE FEE IN AN EXPIRED PATENT (37 CFR 1.378(c))**

Docket Number (Optional)

Mail to: Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Fax: (703) 872-9306

RECEIVED

FEB 24 2005

NOTE: If information or assistance is needed in completing this form, please contact Petitions Information at (703) 305-9282.

OFFICE OF PETITIONS

Patent No. 6,063,028 Application Number 09/045734
Issue Date May 16, 2000 Filing Date March 20, 1998

CAUTION: Maintenance fee (and surcharge, if any) payment must correctly identify: (1) the patent number (or reissue patent number, if a reissue) and (2) the application number of the actual U.S. application (or reissue application) leading to issuance of that patent to ensure the fee(s) is/are associated with the correct patent. 37 CFR 1.366(c) and (d).

2005 FEB 18 PM 4:55

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Also complete the following information, if applicable

The above - identified patent:

- ☐ is a reissue of original Patent No. _____, original issue date _____,
original application number _____,
original filing date _____.
- ☐ resulted from the entry into the U.S. under 35 U.S.C. 371 of international
application _____ filed on _____.

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

14 February 2005
DateJoanne S. Luciano
SignatureJoanne S. Luciano

Typed or printed name of person signing Certificate

02/23/2005 ALLEN 00000014 6063028

01 FC:2551
02 FC:1558450.00 OP
1640.00 OP

[Page 1 of 3]

This collection of information is required by 37 CFR 1.378(c). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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1. SMALL ENTITY



Patentee claims, or has previously claimed, small entity status. See 37 CFR 1.27.

2. LOSS OF ENTITLEMENT TO SMALL ENTITY STATUS



Patentee is no longer entitled to small entity status. See 37 CFR 1.27(g).

3. MAINTENANCE FEE (37 CFR 1.20(e)-(g))

The appropriate maintenance fee must be submitted with this petition, unless it was paid earlier.

NOT Small Entity			Small Entity		
Amount	Fee	(Code)	Amount	Fee	(Code)
<input type="checkbox"/> \$ _____	3 1/2 yr fee	(1551)	<input type="checkbox"/> \$ <u>450</u>	3 1/2 yr fee	(2551)
<input type="checkbox"/> \$ _____	7 1/2 yr fee	(1552)	<input type="checkbox"/> \$ _____	7 1/2 yr fee	(2552)
<input type="checkbox"/> \$ _____	11 1/2 yr fee	(1553)	<input type="checkbox"/> \$ _____	11 1/2 yr fee	(2553)

MAINTENANCE FEE BEING SUBMITTED \$ _____

4. SURCHARGE

The surcharge required by 37 CFR 1.20(i)(2) of \$ 1640.00 (Fee Code 1558) must be paid as a condition of accepting unintentionally delayed payment of the maintenance fee.SURCHARGE BEING SUBMITTED \$ 1640.00

5. MANNER OF PAYMENT

Enclosed is a check for the sum of \$ 1640 + 450 = \$2,090

Please charge Deposit Account No. _____ the sum of \$ _____. A duplicate copy of this authorization is attached.



Payment by credit card. Form PTO-2038 is attached.

6. AUTHORIZATION TO CHARGE ANY FEE DEFICIENCY



The Director is hereby authorized to charge any maintenance fee, surcharge or petition deficiency to Deposit Account No. _____. A duplicate copy of this authorization is attached.

7. OVERPAYMENT

As to any overpayment made please

☐

Credit to Deposit Account No. _____

OR

☒

Send refund check.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

8. STATEMENT

The delay in payment of the maintenance fee to this patent was unintentional.

9. PETITIONER(S) REQUEST THAT THE DELAYED PAYMENT OF THE MAINTENANCE FEE BE ACCEPTED AND THE PATENT REINSTATED.

Joanne S. Luciano

Signature(s) of Petitioner(s)

14 February 2005

Date

JOANNE S. LUCIANO

Typed or printed name(s)

Registration Number, if applicable

617 489 0415

Telephone Number

45 ORCHARD STREET

Address

BELMONT, MA 02478-3008

Address

37 CFR 1.378(d) states: "Any petition under this section must be signed by an attorney or agent registered to practice before the Patent and Trademark Office, or by the patentee, the assignee, or other party in interest."

ENCLOSURES:

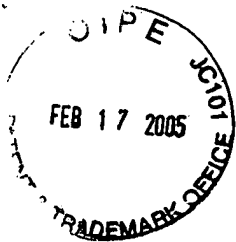
☒

Maintenance Fee payment

☒

Surcharge under 37 CFR 1.20(i)(2) (fee for filing the maintenance fee petition)

☒*Request of Change of Correspondence Address*



JOANNE S. LUCIANO, PhD

45 ORCHARD STREET,
BELMONT, MA 02478-3008, USA
PHONE +1 617.489.0415
FAX: +1 208.728.1133
EMAIL: JOANNE@PREDMED.COM

February 14, 2005

To: United States Patent and Trademark Office
From: Joanne S. Luciano, Patentee
Re: Patent Application number 09/045734
Patent Number 6,063,028

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FEB 24 2005
OFFICE OF PETITIONS

Request for change of Correspondence address

Dear Sir or Madam,

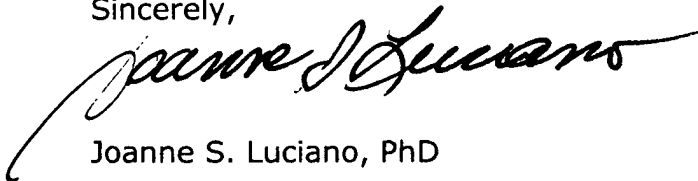
I hereby request a change of correspondence address. I am the patentee and the Patent Agent, Sharon Day has moved out of the area and I have no way of contacting her.

Please direct correspondence, until further notice to:

Joanne S. Luciano, PhD
45 Orchard Street,
Belmont, MA 02478-3008, USA
Phone +1 617.489.0415
Fax: +1 208.728.1133
Email: joanne@predmed.com

Thank you for your consideration.

Sincerely,



Joanne S. Luciano, PhD